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**Bord Iascaigh Mhara**

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**Provider Quality Report**  
**Date: January 2025**

## CONTENTS

<b>Provider Quality Report</b>	<b>3</b>
<b>1 Enhancements of QA System</b>	<b>2</b>
1.1 Update on implementation of conditions and / or specific advice set out in the QA Approval Panel Report	2
1.2 Update on Other Quality Initiatives	5
1.3 What has Worked / Not Worked	8
<b>2 Academic Governance Committee Activity</b>	<b>8</b>
2.1 Mission	8
2.2 Number of meetings and attendance	8
2.3 Agenda for Academic Governance Oversight Meetings	9
<b>3 Feedback Received, Issues Identified and Actions Taken</b>	<b>10</b>
3.1 Summary of Feedback from Learners	10
3.2 Summary of Issues Identified through QA Activities	11
3.3 Summary of Issues identified through review of activity reports	12
3.4 Summary of Issues – Academic Integrity and Award Standards	12
<b>4 Information on Validated Programmes</b>	<b>13</b>
4.1 Programme Metrics	13
4.2 Validated programmes for withdrawal	13
<b>5 Continuing Professional Development (CPD)</b>	<b>14</b>
5.1 CPD opportunities availed of	14
<b>6 Terms and Definitions</b>	<b>15</b>

# Provider Quality Report

## Introduction

This report provides a detailed update on developments since the Bord Iascaigh Mhara's successful QA approval (Reengagement or Initial Access to Validation). It is intended to give a focus and purpose to the structures and systems put in place through that process.

The main functions of provider's quality assurance systems are to:

- assure the integrity of processes such as programme development and assessment, so that awards made to learners are consistent with the award standards.
- monitor the quality of programmes, primarily through the experience of learners and the feedback from independent evaluation
- solidify and disseminate good practice
- address any issues arising which impact on quality.

The purpose of QA Approval was to ensure that each provider has the appropriate quality assurance system and structures to carry out and oversee these functions.

The purpose of this inaugural report is to identify / describe / supply as appropriate:

- Progress in relation to specific advice, if any, given by the QA Approval panel in its report. (Ref 1.1 below)
- Quality initiatives carried out or planned which are in addition to advice given in the report. (Ref 1.2 and 1.3 below)
- Activity by the governance committee(s) established in preparation for the QA Approval process. (Ref 2.1 to 2.3 below)
- Issues, positive and/or negative, identified by learners as part of the learner feedback processes. (Ref 3.1 below)
- Issues, positive and/or negative, identified by internal verifiers and external authenticators as part of the quality assurance of assessment processes. (Ref 3.2 below)
- Recommendations of Academic Council / Quality Committee following its review of statistical and other reports supplied by QQI in October 2023. (Ref 3.3 below)
- Issues pertaining to Academic Integrity and Award Standards as evidenced through assessment. (Ref 3.3 and 3.4 below)
- Quantitative data on validated programmes delivered over a 12-month period. (Ref 4.1 below and spreadsheet attached)
- Relevant CPD taken by staff members. (Ref 5.1 below)

This is the Provider Quality Report for Bord Iascaigh Mhara

It is to be submitted by **January 2025**.

**URL of published QA procedures:** <https://bim.ie/fisheries/training/>

The report has been approved by **BIM' Academic Council** at its meeting of **17-01-25**

Signed



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Carol Lacey,

Chairperson, BIM Academic Council

## 1 Enhancements of QA System

### 1.1 Update on implementation of conditions and / or specific advice set out in the QA Approval Panel Report

	Relevant Core QA Guideline	Condition / Specific Advice from Panel Report	Action(s) Taken	Planned / Actual Completion Date
1	Governance and Management of Quality	1.1 Develop and document a schedule of reports that are considered periodically by the TAD and its constituent panels, and a schedule of reports for publication.	<p>Section 2.12 of the Quality Manual was updated and a schedule of reports for presentation to governance committee and publication listed in Appendices 7 and 8. A list of reports for presentation to the Academic Council is included in the Academic Council Terms of Reference and includes:</p> <ul style="list-style-type: none"> <li>• Annual Quality Assurance Report,</li> <li>• Programme Reports,</li> <li>• Annual Quality Improvement Plan</li> <li>• Programme Quality Improvement Plan</li> <li>• Results Approval Panel Report /Minutes</li> <li>• New Programme Proposals</li> </ul>	Completed July 2022
		1.2 BIM TU is advised that the composition of the TAD needs to be adjusted to include representatives of academic staff from within the organisation, given that the TAD takes responsibility for elements of academic decision-making and quality assurance.	The academic council, formed in 2022 as a subcommittee of the Training and Development Committee (TAD) now takes responsibility for academic and quality assurance matters. The membership of the academic council includes a representative from the academic staff while the skills development manager is a member of the TAD committee. The terms of reference of both the TAD committee and Academic Council will be reviewed to determine if it would be beneficial to have a member of the academic staff on both committees.	Planned Completion Date: December 2025
		1.3 BIM TU is advised that there is a gap within its academic committee structure in relation to the oversight of teaching, learning and assessment, and the oversight of quality and the quality documentation. Establishing a further academic committee with this remit is strongly recommended.	<p>An Academic Council was established in 2022. The Academic Council reports into the Training and Development Committee. Currently there are a total of four members, two external members and two internal members as follows:</p> <ul style="list-style-type: none"> <li>• External members: <ul style="list-style-type: none"> <li>○ Educational Development Consultant (Chair)</li> </ul> </li> </ul>	Completed December 2022

	Relevant Core QA Guideline	Condition / Specific Advice from Panel Report	Action(s) Taken	Planned / Actual Completion Date
			<ul style="list-style-type: none"> <li>○ Principal, Whitehall College, City of Dublin Education and Training Board</li> <li>● Internal members: <ul style="list-style-type: none"> <li>○ Quality Officer</li> <li>○ Principal, BIM - National Fisheries College (NFCI), Greencastle, Co Donegal</li> </ul> </li> </ul>	
		1.4 BIM TU is advised that it is appropriate to include currently enrolled learners at the Programme Board and TAD. In the absence of a currently enrolled learner from the programme under discussion at a Programme Board, inviting a currently enrolled learner from another programme to offer a learner voice is also appropriate. In the absence of availability of a currently enrolled learner, the inclusion of a recent graduate (i.e. under 24 months) is appropriate.	A currently enrolled learner or graduate has been included in the programme boards; however, they are not currently represented on the TAD committee. This will be reviewed when the Terms of Reference of the TAD committee are being updated.	Planned Completion Date: December 2025
2	Documented Approach to Quality	2.1 Redesign the graphic representation of the structures of academic governance and decision-making to accurately reflect the QA system.	The graphic representation of the structures of academic governance were redesigned and included in the QA manual. These were updated in 2022, with the formation of the Academic Council.	Completed December 2022
		2.2 Present key procedures in diagrammatic form in the QA manual, for example new programme development, plagiarism/academic misconduct, reasonable accommodation, assessment guidelines, trainer evaluation and monitoring.	Governance structures and a summary of the documented QA system have been included in diagrammatic form in the QA manual. Presenting other key procedures in diagrammatic format will be included in the Quality Improvement Plan for 2025.	Planned Completion Date: December 2025
		2.3 BIM TU is advised that the QA documentation needs to clarify the relationship between the TAD and other committees or units within BIM TU, e.g. the PAP and RAP. This could usefully differentiate between 'dotted	The QA manual was updated to include graphic representation which clarifies the relationship between the TAD and the other committees.	Completed December 2022

	Relevant Core QA Guideline	Condition / Specific Advice from Panel Report	Action(s) Taken	Planned / Actual Completion Date
		line' communication channels and reporting lines and identify whether reports are submitted for noting or for approval.		
		2.4 BIM TU is advised that despite substantial progress in the quality of its documentation (which is commended by the panel) the suite of documents requires further proofing to ensure consistency of information across charts, appendices, policies and procedures.	The QA documentation has been updated; however, a further review and update is required in light of restructuring of the Skills Development Services unit and QA system updates. This will be included in the Quality Improvement Plan for 2025.	Planned Completion Date: December 2025
3	Programmes of Education and Training	3.1 BIM TU is advised that an explicit procedure for RPEL should be included within the SOP, even if rarely used within BIM TU, and whether it is for credit or for access. Further, this procedure does not need to be reproduced at programme level if an institutional policy exists, streamlining the QA processes. RPL and RPEL procedures should identify for learners where the contact point is within the provider.	Update the SOP to include RPEL will be included in the Quality Improvement Plan for 2025.	Planned Completion Date: December 2025
5	Teaching and Learning	5.1 Develop an overarching TLA strategy for BIM TU.	An overarching Teaching, Learning and Assessment strategy was developed and included in the QA Manual.	Completed May 2020
7	Supports for Learners	7.1 Document in more detail the full range of academic and non-academic resources and supports which are available to learners.	The QA manual was updated with details of the range of academic and non-academic resources and supports available to learners.	Completed May 2020
		7.2 Clarify in the QA manual that the complaints procedures apply to all complaints from or about students.	Complaints section in the QA manual was updated.	Completed May 2020
8	Information and Data Management	8.1 Put in place a centralised electronic student record system.	A new centralised electronic student record system was launched in Q1 2024. Phase 2 of this project is underway.	Planned Completion Date: December 2025

	Relevant Core QA Guideline	Condition / Specific Advice from Panel Report	Action(s) Taken	Planned / Actual Completion Date
		8.2 Include specific reference to Data Protection legislation and the role of the data controller in the QA manual.	The data protection section in the QA manual has been updated to include reference to relevant legislation and wider BIM policies in this area.	Completed May 2020
<p>Commentary and Reflections (<i>what have you learned, if anything, from addressing the advice given by the QA Approval panel at the meeting and in the panel report</i>)</p>				
<p>The framework for continual improvement has ensured that the QA system and programmes are kept up to date and relevant to learners and other key stakeholders. The Academic Council has made a valuable contribution to the QA system providing guidance and support.</p>				

## 1.2 Update on Other Quality Initiatives

No.	Quality Initiative	Issue being addressed by this initiative	Update on Status Provide brief update on status, whether completed or in progress.	Reference to updated/new policy or procedure
1	Completion of Annual Quality Assurance (QA) Report and development of Annual Quality Improvement plan (QIP) from the recommendations in the report.	Continual Improvement	<p>Annual QA report (Internal) was produced in 2022 and 2023. The QIP has proved a vital tool for tracking progress on implementation of the recommendations in the annual QA report.</p> <p>The QIP is a live document with updates recorded quarterly. There has been significant progress made on implementation of the recommendations. All recommendations that have not yet been actioned or closed out will be further reviewed and added to the QIP 2025 where appropriate.</p>	Quality Improvement Plan (QIP)



2	Introduction of a Programme Quality Improvement Plan (PQIP) for all QQI validated programmes.	Continual Improvement, ensuring that recommendations from Internal verification, external authentication, programme board meetings etc. are capture and actioned	The PQIP has been developed for all QQI validated programmes. This is a live document and will be updated by the relevant programme leaders on an on-going basis. It is still bedding in and has already proved beneficial.	Programme Quality Improvement Plan (PQIP)
3	Annual programme report and annual programme board meetings for all QQI validated programmes.	Programme Monitoring and Review	An annual programme report is produced using a standard report template. An annual programme board meeting is held for all QQI validated programmes and minutes retained. The programme board includes a learner, trainer and industry representative as well as a colleague from another business unit in BIM Recommendations from programme board report and programme board meetings are included in the PQIP.	Programme Board/Programme Report Template
4	Introduction of a Certification Plan and Assessment Schedule to track all activities relating to assessment and certification.	Helps ensures that assessment results are submitted promptly and that students receive their QQI award in a timely manner.	Ongoing - All staff can easily check the assessment and certification status of programmes.	Certification Plan & Assessment Schedule
5	Introduction of student surveys six months post training.	Learner Voice & Programme Monitoring and Review	This was introduced in Q3 2024. Feedback has been reviewed and will be collated and analysed further. This will provide useful information for programme reviews and development.	Learner Feedback Summary
6	Continual Professional Development (CPD) in the field of Training and Education.	Previously CPD for trainers focused on subject matter only. Now this has been extended to include training/teaching skills	A Train the Trainer (Master Training Programme) for all staff took place at the Team meeting in Jan 2024. A follow-up session is planned for 2025.  One staff member has commenced the Masters (NFQ, Level 9) degree in Training and Education.	Quality Improvement Plan

			One staff member has completed a (NFQ, Level 9) Certificate in Teaching and Learning in Higher Education.	
7	Independent Chair for Results Approval Panel (RAP).	Improved Governance	Terms of Reference for RAP will be updated to reflect changes.	Terms of Reference RAP
8	Equality Diversity and Inclusion (EDI)- Several initiatives to embed EDI in our training.	Supports for Learners	<p>Diversity and Inclusivity Policy added to QA manual</p> <p>Two trainers completed the AHEAD Start programme (online course on supporting students with disabilities).</p> <p>All staff attended disability awareness training provided by AHEAD</p> <p>Two staff completed the Universal Design for Learning Digital Badge (National Forum for the Enhancement of Teaching and Learning/AHEAD/UCD).</p>	QA Manual
9	The Academic Council held one of their meetings on site in the BIM college in Greencastle, Co Donegal	Improved Governance & Embedding a quality culture	Complete	N/A
<p><i>Commentary and Reflections (comment on the effectiveness to date of any quality initiatives completed)</i></p>				
<p>Initiatives have helped to enhance the quality of programmes and services and embed a quality culture in the unit.</p>				

### 1.3 What has Worked / Not Worked

**Give a brief overview of what you feel has *worked well* arising from your new quality assurance systems**

- The formation of the Academic Council has led to improved governance, oversight of teaching, learning and assessment, and the oversight of quality.
- The formation of Programme Boards for all QQI validated programmes with representation from the seafood industry and learners/recent graduates ensures that programmes are kept up-to date and relevant to key stakeholder.
- Continual Improvement is a key aspect of the QA system. A quality culture has been embedded where all staff are involved in the QA system and quality is now accepted as a responsibility for all to improve upon.
- The QA documentation is available electronically and updated regularly ensure that it remains relevant and easily accessible to all.

**Give a brief overview of what you feel has *not worked* in your new quality assurance system and which you may discontinue**

N/A

## 2 Academic Governance Committee Activity

(e.g., Academic Council, Quality Committee or equivalent, hereafter called academic governance committee)

### 2.1 Mission

What is the mission of the academic governance committee? If it doesn't have a formal mission, please supply its terms of reference.

The academic council has responsibility for all academic governance matters in the Skills unit. All training offered by the BIM's skills unit is included within its scope, but the primary focus is on programmes of education and training, approved by QQI and leading to awards on the National Framework of Qualifications (NFQ). The academic council acts as a "critical friend" to the skills unit in relation to quality assurance, education matters, programme development and learner interests. For further details see: [BIM Academic Council – Terms of Reference](#)

### 2.2 Number of meetings and attendance

How many times has the academic governance committee met since establishment?

<b>Date of establishment</b>	July 2022	<b>Total number of meetings to date</b>	10
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<b>Meeting Date</b>	<b>Number of Committee Members in attendance (e.g. X attended out of X total members)</b>
16/11/22	4/4
23/02/23	4/4
11/05/23	4/4
14/09/23	4/4
07/12/23	4/4
21/03/24	4/4
19/06/24	4/4
18/09/24	4/4
05/12/24	3/4
17/01/25	4/4

### 2.3 Agenda for Academic Governance Oversight Meetings

<b>Standing Agenda Items</b>
1. Chairperson welcome, apologies and approval of agenda.
2. Conflict of Interest
3. Approval of Minutes of previous meeting
4. Update on action plan from previous meeting
5. New Programme Proposals/ Programme Revalidations
6. Programme Board Meetings
7. Results Approval Panel (RAP) Meetings Minutes
8. Quality Improvement Plan (QIP)
9. Programme Quality Improvement Plan (PQIA)
10. Learner Feedback
11. Actions Summary and any points to bring forward to the to the TAD committee
12. AOB

### 3 Feedback Received, Issues Identified and Actions Taken

#### 3.1 Summary of Feedback from Learners

No.	Primary Themes emerging from Learner Feedback in last 12 months	Programme Area(s)	Summary of Actions Taken as a Result
1	Very positive feedback received, with comments on the practical aspects of the course being most beneficial.	Fishing Vessel/Marine Engineering	The programme was rolled out for the first time in 2023/2024. The feedback immediately post training was very positive. More beneficial feedback will be available shortly from those learners that have spent time aboard fishing vessels post training. Once available, this will be taken into account and actioned accordingly.
2	<p>Overall positive feedback and very high satisfaction rate with the instructors.</p> <p>Some learners commented that the course is intensive with long days.</p> <p>Need for Improved changing /shower facilities identified by many learners.</p>	Commercial Diving	<p>Programme Team discussed learner comments re: intensive/long days. The programme leader advised that the diving courses were designed to be completed in the shortest amount of time possible in order to accommodate the candidates who may have to take time out from existing employment and also to facilitate the fish farms who would only be able to send staff for training at certain time of the year. Working 12-hour days is also consistent with a typical diving day in industry, many projects operate on a 24hr basis and so two 12-hour shifts would be normal. However, since the original courses were first run it has become apparent that the learners find the days long and struggle to complete self-study assignments, projects and revision. For these reasons an additional week was piloted on the recent Surface Supply Diving (Inshore) course, and this has helped to address some of these challenges.</p> <p>Plans are in place for improved changing/shower facilities. This has been added to the Programme Quality Improvement Plan.</p>
3	Very positive feedback received, with comments on the practical aspects of the course being most beneficial.	Fishmonger Skills	All feedback is being reviewed in preparation for programme revalidation in 2025.

<b>Confirm date(s) that academic governance committee received summaries of learner feedback for consideration.</b>	At each Academic Council meeting, learner feedback is discussed.
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**3.2 Summary of Issues Identified through QA Activities**

<b>No.</b>	<b>Summary of Issues Identified in IV/ EA / RAP / Monitoring Reports</b>	<b>Summary of Actions Taken as a Result</b>
1	Manual transfer of marks led to some errors which were identified at IV stage.	Results are now compiled and transferred electronically for some programmes. This has reduced the number of transfer errors.
2	Recommendations from previous IV/EA reports not always been actioned.	<p>Programme Quality Improvement Plan (PQIP) introduced for each QQI validated programme. All recommendations from IV/EA/RAP/Monitoring reports are logged here along with details of follow-up action.</p> <p>Assessment Portfolio checklist updated to include a section for programme leader to provide an update on recommendations in previous IV/EA report.</p>

<p>Confirm date(s) that academic governance committee reviewed Internal Verifier (IV), External Authenticator (EA) or other internal monitoring reports.</p>	<p><b>Programme Reports/Programme Board Meeting Minutes:</b>  <i>Reviewed at Academic Council meetings on 23-02-23, 21-03-24, 19-06-24, 17-09-24.</i></p> <p><b>Results Approval Panel Meeting Minutes/IV/EA Reports:</b>  <i>Reviewed at Academic Council Meetings on 17-09-24, 19-06-24, 21-03-24, 07-12-23.</i></p> <p><b>Quality Improvement Plan / Programme Quality Improvement Plan</b>  <i>Reviewed at all Academic Council meetings since 2023.</i></p>
<p>List actions taken, if any, following direction from academic governance committee arising from review of these reports</p>	<ul style="list-style-type: none"> <li>Recommendations in the Quality Improvement Plan are colour coded to clearly identify priorities. The document is updated quarterly.</li> </ul>

	<ul style="list-style-type: none"> <li>• The Programme Quality Improvement Plan is now circulated to the Academic Council in advance of each meeting and is now a standing agenda item on Academic Council meeting agendas.</li> <li>• CPD Training in education/train the trainer organised on-site.</li> <li>• Independent Chair of Results Approval Panel.</li> </ul>
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### 3.3 Summary of Issues identified through review of activity reports

No issues identified

No.	Summary of Issues Identified	Summary of Actions Required as a Result
1	N /A	N/A

### 3.4 Summary of Issues – Academic Integrity and Award Standards

#### Academic Integrity

Has the academic governance committee received data on cases of academic misconduct / cheating or been made aware of any risks to the integrity of QQI awards and, if so, what were the main issues arising? What actions have been taken in response?

No issues identified.

No.	Summary of Issues Identified	Summary of Actions Required as a Result
1	N/A	N/A

**Awards Standards as evidenced through assessment**

Has the academic governance committee received reports on maintenance of QQI award standards and, if so, what were the main issues arising? What actions have been taken in response?

No issues identified.

No.	Summary of Issues Identified	Summary of Actions Required as a Result
1	N/A	N/A

**4 Information on Validated Programmes**

**4.1 Programme Metrics**

Using the attached spreadsheet listing all your validated programmes, please supply the following data per programme delivered during period January to December of the last full year:

- a. Number of courses offered<sup>1</sup> 11
- b. Total number of learners enrolled <sup>2</sup>on all courses. 74
- c. Total number of learners who completed their course<sup>3</sup>. 67
- d. Total number of learners who did not complete the course.<sup>4</sup> 7
- e. Total number of learners who achieved a QQI award.<sup>5</sup> 66

**4.2 Validated programmes for withdrawal**

<sup>1</sup> **Courses:** Instances of a validated programme started in the period.

<sup>2</sup> **Enrolled:** A learner is enrolled on the course if they register and attend at least 25% of the directed learning sessions on the course.

<sup>3</sup> **Completion:** A learner who completes the course has attended 75% of the directed learning sessions on the course.

<sup>4</sup> **Non-Completion:** this is the number of enrolled learners who, for whatever reason, did not complete the course i.e. attended at least 25% but less than 75% of directed learning sessions.

<sup>5</sup> **Certification:** The QQI award achieved may be of any class i.e. major, minor(s) or special purpose.



The Fishing Vessel Engineering Programme (major award) PG15231 and the Marine Engineering Processes (component) PG15231 can be withdrawn as these have been replaced by the Fishing Vessel Engineering Skills (60 credit programme) and the embedded Marine Engineering Processes and Operations (15 credit) programmes which were validated in 2023.

## 5 Continuing Professional Development (CPD)

### 5.1 CPD opportunities availed of

No.	Name of event / programme	Date attended	Attended by (role)
1	Train the Trainer (Master Trainer Programme)	January 2024	College Principals Instructors/Trainers Programme Leaders Quality Officer
3	Universal Design for Learning (UDL) Digital Badge	October -December 2024	College Principal Quality Officer
4	Disability Awareness Training	Various Dates During 2024	College Principals Instructors/Trainers Programme Leaders Quality Officer
5	Environmental Management System Awareness Training – (ISO 14001)	June 2024	College Principals Instructors/Trainers Quality Officer
6	All trainers have engaged in CPD relevant to the subject matter they teach in line with MSO requirements for delivery of maritime training and education.  For QQI validated programmes, the programme leaders and trainers engage in regular CPD for example in 2024:	Various Dates During 2024	Instructors/Trainers Programme Leaders

	<ul style="list-style-type: none"> <li>the programme leader for Fishing vessel engineering programmes recently completed a Bachelor of Engineering (Honours) Degree.</li> <li>the Diving programme leader and college principal attend the Annual International Dive Conference.</li> </ul>		
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## 6 Terms and Definitions

AHEAD: Association on Higher Education and Disability

BIM: Bord Iascaigh Mhara

CPD: Continual Professional Development

EA: External Authentication

EDI: Equality, Diversity and Inclusion

FSAI: Food Safety Authority of Ireland

QA: Quality Assurance

ISO: International Standards Organisation

IV: Internal Verification

MSO: Marine Survey Office

NFQ: National Framework of Qualifications

NFCI: National Fisheries College of Ireland

PAP: Programme Approval Panel

PQIP: Programme Quality Improvement Plan

QIP: Quality Improvement Plan

QQI: Quality and Qualifications Ireland

RAP: Results Approval Panel

RPEL: Recognition of Prior Experiential Learning

RPL: Recognition of Prior Learning

- SOP: Standard Operating Procedures
- TAD: Training and Development (committee)
- TLA: Teaching Learning & Assessment
- TU: Training Unit
- UDL: Universal Design for Learning






# BIM Quality Report 17-01-25

Final Audit Report

2025-01-20

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